

## Peer Parent Program Audit Tool

The "Peer Parenting" program provides individualized parenting instruction to Clients in their own homes to reduce the risk of abuse or neglect, with an end goal of maintaining the family unit or re-unifying the family with safe and healthy parenting skills. It's an individualized, skill-based teaching opportunity based on the conviction that parents and children are best served when united as a family in a safe and nurturing environment. Peer Parents are to provide individualized parenting instruction (Peer Parent Services) to DCFS Clients using the evidence-based Systematic Training for Effective Parenting (STEP) curriculum. Services shall address, but are not limited to: parenting skills, communication skills, home management, and how to access community resources.

### Part I. B. 4. Insurance and Indemnification

#### a. Required Insurance:

- (1) Maintain commercial insurance or self-insurance for the dollar amounts and types of coverage specified in this Contract.
- (2) Insurance company Rated "A-" or better, with a financial size category of Class VII or larger.
- (3) Commercial insurance may be obtained from a company that does not meet the above rating and/or class size, if Contractor provides documentation verifying the insurance company providing insurance is reinsured by another affiliated insurance company that does meet the required rating and class size requirements.
- (4) General and professional liability insurance policies must name: State of Utah, DHS, DHS/DCFS and their officers, and employees as additional insureds (primary coverage, not contributing coverage).
- (5) "Additional insured" endorsement not required for automobile or Workers' Compensation
- (6) If an "individual" providing services of less than 25 hrs/wk, additional insured endorsement may omit the requirement that the endorsement be primary coverage.

b. Deductibles, self-insured retentions, self-insurance costs, *and similar items* **may not exceed \$10,000.00**, unless prior written approval.

#### c. Types of Liability Protection:

Private Contractor-Commercial Insurance: If not a governmental entity of the State of Utah, Contractor shall maintain:

- (a) *General Liability*: Not less than **\$1,000,000 each occurrence, \$2,000,000 aggregate**. Must cover each site where services are provided.
- (b) *Auto Insurance*: If the Contractor transports clients, policy must have a combined single limit of not less than **\$1,000,000**.

#### d. Workers' Compensation

### Part I. B. 5. Emergency Management and Business Continuity Plan

1. Plan shall address (as they pertain to Contractor's services):

- a. Evacuation procedures;
  - b. Temporary or alternate living arrangements,
  - c. Maintenance, inspection, and replenishment of vital supplies (including supplies necessary for infection control or protection from hazardous materials),
  - d. Communications (with Contractor staff, appropriate governmental agencies, and clients' families);
  - e. Transportation;
  - f. Recovery and maintenance of client records; and
  - g. Policies and procedures that:
    - (1) ensure required staffing ratios;
    - (2) address leave and recall of employees unable to work for extended periods,
    - (3) ensure timely discharge of financial obligations, including payroll.
2. Annual training for staff.
  3. Provide DCFS with a copy of its plan upon execution of Contract.
  4. Evaluate plan annually. Any modifications provided to DCFS within 15 days of the time the modifications are made.

#### **Part I. B. 11. Code of Conduct**

Follow and enforce DHS Provider Code of Conduct.

- a. Before allowing any employee/volunteer to work with clients:
  - (1) Provide current copy of Code of Conduct to each employee/volunteer,
  - (2) Copy of signed/dated Code of Conduct statement in employee/volunteer file..
- b. Obtain Code of Conduct Poster annually, and post prominently.

#### **Part II. E. Service Locations and Caseloads**

Provide peer parenting services in client's home, and meet following case load requirements:

1. Northern Region—**190 families annually, 16 new families per calendar month**
2. Salt Lake Valley Region—**160 families annually, 14 new families per calendar month.**
3. Western Region—**175 families annually, 15 new families per calendar month**
4. Eastern Region--**80 families annually, 7 new families per calendar month**
5. Southeast Region—**65 families annually, 6 new families per calendar month**

#### **Part II. F. Contractor's Qualifications**

1. Registration with Dept. of Commerce (unless a sole proprietor).
2. Current business license.
3. Capacity for minimum caseload requirements.
4. At least five years full-time professional child welfare work experience, working directly with children and families and/or teaching and developing parenting classes.

#### **Part II. G. Staff Qualifications**

Peer Parent Supervisors:

- a. Bachelor's Degree in human services or a related field (i.e., psychology, sociology, child development, social work, and/or
- b. At least 4 years full-time professional child welfare work experience working directly with children and/or families.

Peer Parents:

- a. Minimum of 21 years of age; and
- b. Have at least 2 years experience working with children.

## **Part II. H. Training Requirements**

**I. Within first week of employment (or within one week of commencement of Contract) and prior to having direct access to Clients, all staff** shall receive at a **minimum two hours** of training on the following topics:

- a. Orientation to the requirements of this Contract;
- b. Recognizing child abuse and neglect and legal reporting requirements;
- c. Review of the DHS Provider Code of Conduct;
- d. Contractor's emergency management procedures, including emergency response and evacuation procedures if a crisis arises while the Contractor and/or staff are working directly with Clients; and
- e. Abuse, harassment and anti-discrimination training, including but not limited to cultural sensitivity; physical, emotional and sexual abuse; and harassment, for all staff with direct access to clients.

**2. Within the first 30 days of employment (or 30 days following commencement of Contract) and prior to having direct access to Clients, Peer Parent Supervisors and Peer Parents** shall receive **an additional 12 hours** of training on the following topics:

- a. Child development and behavior management; how child abuse, neglect, trauma, and unstable family dynamics affect normal child development;
- b. Home management;
- c. Community resources; and
- d. Systematic Training for Effective Parenting (STEP) curriculum.

**3. Within six months of commencement of Contract, or within six months of the date of hire** for staff hired after commencement of this Contract, **all staff** shall attend **Practice Model Training**.

**4. Annually** Peer Parent Supervisors and Peer Parents shall complete **12 hours of ongoing training**. (Practice Model Training hours may be counted toward the 12 hours of required ongoing training.) Ongoing training shall include, at a minimum, the following:

- a. Review of the STEP curriculum.
- b. Working with difficult families;
- c. Conflict resolution strategies (including de-escalation);
- d. Review of Provider Code of conduct; and
- e. Review of Contract requirements.

5. Assessments for training. Examples:
  - a. Testing and scoring;
  - b. Written summary of training content; and
  - c. Observation of peer parent work in the Client's home.
6. Documentation of training, for each trainee:
  - a. Title and brief description of course content;
  - b. Date training was completed;
  - c. Duration of training;
  - d. Instructor name and qualifications that relate to the subject matter;
  - e. Trainee's signature (manual or electronic), and a statement verifying the employee or volunteer understands the training received; and
  - f. Documentation of each employee's competency in the training.

## **Part II. I. Background Screening Requirements**

1. All who will have "direct access" to Clients complete background screening application **within 7 days of the date of hire, and annually thereafter.**
2. Staff who have not cleared a background screening shall have no unsupervised contact with Clients; when in contact with Clients must be accompanied by a staff member who has a current background screening clearance.

## **Part II. J. General Service Requirements**

1. Written Regional Peer Parent Plan
  - a. Coordinate with region office **within 60 days of Contract.**
  - b. Conduct a needs assessment (determine number of Peer Parents needed).
  - c. Create Regional Peer Parent Plan **within 90 days Contract, annually thereafter.**
    - (1) Number of Peer Parents to be recruited/trained annually
    - (2) Number of Peer Parents needed with specific skills sets (i.e. peer Parents who speak a foreign language);
    - (3) Additional goals for program expansion requested by each region;
    - (4) Waiting list procedures, at a minimum:
      - i. who has authority to place client list;
      - ii. maximum time a Client may remain on the list, procedures when the maximum time has been exceeded;
      - iii. how Clients will be removed from the list; and
      - iv. communication plan with DCFS when client put on waiting list.
  - d. At least one objectives is to maintain or increase the number of Peer Parents and the number of Clients served.
  - e. Contractor, region office, and state office must approve and sign the plan prior to implementation, and annually..
  - f. **Review** plan with the region office **every six months.**

g. Updates or revisions made through written addendum, approved through signature of regional designee and state office designee.

2. Recruitment:

- a. Recruit Peer Parents who reflect population characteristics they will be serving (also target currently licensed resource families).
- b. Tracking and engaging individuals who have demonstrated an interest by:
  - (1) Following up with those who have made an inquiry;
  - (2) Provide timely training opportunities;
  - (3) Provide prospective Peer Parents with information and resources necessary to resolve concerns.

3. Maintain at least two Peer Parents who speak Spanish fluently in each region. If unable to fulfill requirement, submit written request to region office and state office, indicating why requirement cannot be fulfilled.

- a. Document recruitment activities and barriers encountered;
- b. Approved annually through signature of region designee and state office designee.

4. Attend quarterly meetings, when requested by State Office designee.

5. Annual process to evaluate quality of service by each **individual** Peer Parent, and ensure STEP curriculum is being utilized with fidelity; must include plan to remediate deficiencies.

## **Part II. K. Program Service Requirements**

1. Core Curriculum: STEP parenting program as core curriculum (may be supplemented by other training materials for subjects not covered by STEP). Supplemental material approved in writing by State Office prior to use.

2. Peer Parent Supervisor: All Peer Parents must be supervised. Supervisor shall:

- a. Assign referrals within **five business days** (unless there is a waiting list)
- b. Review with each Peer Parent the progress, issues and/or concerns of each Client;
- c. Address, resolve and document client complaints;
- d. Ensure client files have required documentation;
- e. Ensure required training prior to providing services;
- f. Ensure Peer Parents comply with STEP program as core curriculum.

3. Service Coordination:

- a. PSA obtained, Peer Parent assigned within **5 business days**,
- b. Within **5 business days of referral**, notify DCFS of any service delay/waiting list placement, and provide estimated date service shall begin.
- c. Peer Parent completes following services:
  - ( 1) Initial Assessment: STEP Parent Survey/Evaluation Form
  - (a) **Contact client within five business days of assignment** to Peer Parent

- (b) Document/**notify Case Manager** of any **scheduling difficulties within 7 business** days of assigning referral to Peer Parent.
- (c) Notify Case Manager **within 24 hours** of **scheduling initial assessment** appointment, coordinate with Case Manager to attend initial assessment; document notification in client file.
- (e) Complete **initial assessment within 10 business** days from assignment to Peer Parent; provide copy of assessment to Case Manager.
- (f) **Assessment** includes:
  - (i) Client's education level;
  - (ii) Cultural considerations
  - (iii) Client's parenting strengths and needs;
  - (iv) Observations of the Client(s) in their home environment;
  - (v) Input from Case Manager;
  - (vi) The Client's knowledge and skills related to parenting-related life skills
  - (vii) Results of the pre-assessment administered to the Client
- (g) Date initial assessment was completed, signature of individual conducting assessment, date sent to Case Manager.
- (2) Written Parenting Instructional Plan:
  - (a) Submit within **15 business days** from assignment of the referral. Focused on Client's individualized needs, identify applicable STEP modules to be covered.
    - (i) Consistent implementation of effective parenting skills,
    - (ii) Knowledge of developmental stages, age appropriate expectations and interactions with children;
    - (iii) Communication skills,
    - (iv) Maintenance of a clean, safe environment
    - (v) Planning nutritious meals;
    - (vi) Making and following a home budget; and
    - (vii) Community involvement, community resources/services
  - (b) Also includes:
    - (i) Measurable, time-limited goals
    - (ii) Specific method(s) that will be used for each goal
    - (iii) Schedule for service delivery, including frequency and duration,
    - (iv) Schedule for reviewing Client's progress and updating plan,
    - (v) Date completed, Peer Parent signature, client signature
    - (vi) Date sent to Case Manager.
- (3) Peer Parents may supervise visitation between Clients and children when visitation is part of the STEP curriculum.
- (4) Document progress in progress report.
- (5) Child and Family Team Meetings
  - a. Ensure Peer Parents attend CFTM as requested by DCFS,
  - b. Document attendance by indicating the meeting date in the Client's file;
  - c. Bill up to a max. of 3 units/ meeting.

(In addition to 8 units allowed during week; should be authorized on PSA.)

(6) Discharge Summary

(a) Report within **15 days** of discharge:

- (i) Date of the last home visit;
- (ii) Progress/lack of progress on each goal;
- (iii) Timeline of services provided;
- (iv) Referrals to community resources;
- (v) Results of the post-assessment;
- (vi) Reason for case discharge and date of discharge;
- (vii) Signature of Peer Parent and the Client; and,
- (viii) Date the discharge summary is sent to the Case Manager.

(b) Documentation if Client refuses to sign the discharge summary;

(c) Maintain a copy in Client's file.

(7) Evaluation Form:

(a) Develop evaluation form and encourage Clients to give feedback:

- (i) The Client's name(s);
- (ii) Dates services
- (iii) Client's general opinion of the peer parent service.

(b) If Client refuses to complete, document in Client's file.

4. Pre and Post Assessment Tools: Use the STEP Parent Survey and Evaluation Form. A copy of the post assessment provided to Case Manager within **15 days** of discharge.

5. Service Delivery:

a. Teach STEP curriculum;

b. Present face-to-face lessons,

c. Assist Clients in accessing other community services/resources

d. Initial services maximum of **120 calendar days** from first face-to-face visit.

(1) If still in need of services after 120 days, may request **first extension** for a **maximum of 60 days**; document the reason for the extension.

(a) Documentation submitted in writing to Case Manager, new PSA.

(b) No services provided w/o written approval

(2) If Client is in need of services beyond 60 day extension:

(a) Consult with Case Manager regarding second extension.

(b) Upon written approval by Case Manager for **second extension**, contact Regional Designee for second extension in writing, **maximum of 30 days**. (Must include Case Manager's signature.)

(c) New PSA, written extension approval in client's file.

(3) At time of service, client signs documentaiton of service hours and dates.

e. Progress notes within 48 hours of home visit, included in client file:

(1) Date of home visit;

(2) Start and end time;

(3) Subject matter, and goal it supports;

(4) Method used;

(5) Other relevant information about the family, including Client's reaction

- to the lesson; and
- (6) Referrals made to community services/resources.
- f. Reasons for cancellation of a visit, or any reduction in visit length/frequency, documented in monthly report.
- g. Home visits min. of once a week, at least 60 min. (2 units of service). Visits are face-to-face, don't exceed 4 per week (8 units of service). Document the progress and justify changes in service delivery in the Client's file.

## **Part II. M. Quality Assurance**

Internal quality assurance process:

1. Interdisciplinary committee that evaluates quality of services delivered,
2. Committee meets quarterly, authority to make needed change, or report recommendations directly to executive director,
3. Systematic data collection and evaluation process of service performance and Client results (may include Client satisfaction surveys),
4. Process to implement changes.

## **Part II. O. Reporting Requirements**

### **1. Incident Reporting:**

- a. Peer Parents maintain list of phone numbers to report emergencies, change in safety and/or crisis incidents. Notify Case Manager, Region Designee, or statewide intake (if after hours of emergency, change in safety and/or crisis incident **within 24 hours** of when it is identified.
- b. Document date, time and method of notification in Client file and Progress Report.

### **2. Progress Reports:**

- a. Written report to Case Manager within **5 business days** of a parenting session in which the Peer Parent identifies any emergency, change in safety, crisis incident (or when requested by Case Manager).
- b. Written monthly report, submitted to Case Manager **by 15<sup>th</sup> of each month:**
  - (1) Dates and duration of each home visit.
  - (2) Progress on Parenting Instructional Plan objectives:
    - (a) Participation in services, and
    - (b) Demonstration of skills.
  - (3) Date that specific goals were achieved by the Client.
  - (4) Barriers encountered that inhibit the Client's progress.
  - (5) Change in needs
  - (6) Any decrease in visits, and the reason for the decrease.
  - (7) Date and signature of the Peer Parent.
  - (8) Date sent to Case Manager.
- c. Maintain all progress reports and court reports in Client's file.



3. Quarterly Reports: Submit to Regional Designee State Office Designee for services provided in each contracted region no later than **30 days after the completion of each quarter** (July-Sep: Oct-Dec: Jan-Mar: Apr-Jun).

- a. Contractor's name, current reporting quarter, and the Contract number;
- b. Number of Peer Parents at end of the quarter;
- c. Number of new Peer Parents trained/recruited;
- d. Number of new families served. Include DCFS case numbers, organized by whether case was referred from an in-home services case or an out-of-home services case;
- e. Number of new adults served;
- f. Number of new children served;
- g. Number of ongoing adults and children served;
- h. Number of families whose services were discharged successfully and had completed the goals in the Parenting Instructional Plan; and
- i. Number of families whose services were discharged unsuccessfully and had not completed the goals in the Parenting Instructional Plan.

4. Annual Reports: Submit to Regional Designee and State Office Designee no later than **July 15<sup>th</sup>** for **each contract year**:

- a. The Contractor's agency name, Contract year and Contract number;
- b. Qualitative information: Outcomes, success stories and barriers encountered for each region in which a Contract is awarded. Summarize reasons for goals not completed and reasons for premature case discharges.

5. Provide any additional reports requested by DHS/DCFS.

## **Part II. P. Record Keeping Requirements**

1. Client Files: Ensure Client confidentiality: information in locked rooms or locked filing cabinets, or in secure electronic programs and have written policies and procedures on the release or disclosure of family records

. Record includes:

- a. Date Contractor was contacted to provide services
- b. Referral form;
- c. Initial assessment;
- d. Parenting Instructional plan including goals set;
- e. Monthly progress reports;
- f. Documented contacts and attempted contacts with the Client and Case Manager;
- g. Pre and post assessment;
- h. Notes of all home visits, the reasons for any delay of services (including scheduling problems, and reasons why visits were not completed weekly);
- i. Evaluation forms or documentation of refusal to complete the form;
- j. Date of CFTMs attended;
- k. Documentation and written approval of any extension of services beyond the initial 120 day period;
- l. Discharge Summary;

m. PSAs.

2. Personnel Records:

- a. Position description, including hire date;
- b. Documentation of all training courses completed (date, number of hours, type of training, name of trainer and location of training);
- c. Current, signed DHS Provider Code of Conduct (done annually);
- d. Documentation of a current (to be screened each year), cleared background screening;
- e. Peer Parent Supervisor: Documentation of qualifications (identified in G.1);
- f. Peer Parent: Documentation that Peer Parent is 21 years of age or older; and,
- g. Peer Parent: Documentation if the Peer Parent is fluent in Spanish or another language.

**Part II. Q. Authorization to Provide Service**

1. Prior to providing services, PSA shall be received from Case Manager. Must include:
  - a. Needed service description,
  - b. Rate of pay,
  - c. Units authorized,
  - d. Start date and authorized signatures.

**Part II. R. Milage Reimbursement**

1. When required to travel **more than 60 miles round trip** for peer parenting sessions, CFTM or other services related to this Contract, receive mileage reimbursement according to the mileage rate in the, \$0.38 per mile, for all miles traveled.
2. Obtain prior written approval from Case Manager for travel more than 60 miles round trip.
3. Single reimbursement per trip, regardless of the number of Clients receiving services.
4. Submit all requests for mileage reimbursement on a “One-Time Payment Form” **within 90 days of the trip**.

**Part II. S. Billing**

- I. Bill for services based on the contracted unit service rate. No reimbursement for services not on PSA.
  - a. Payment based on number of service units (based on a 30-minute unit) delivered.
  - b. Bill only for face-to-face peer parenting time with Clients, regardless of whether one or both Clients (parents) are present.
  - c. Time billed Peer Parent attendance at a CFTM are in addition to the 8 units of service allowed for face to face home visits during a week. (PSA authorization shall include this.)

- d. Documentation signed by Client, indicating that the service was provided, number of service hours, date, and who provided service.
2. Submit billings no later than the 20<sup>th</sup> of the following month.
3. Maintain service records that adequately support all billings submitted.

**Part IV. B. Payment Rate:**

Peer Parenting Contract Payment (PPC)	Unit: 30 minutes	\$33.00/unit
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